

ARREST AFFIDAVIT / FIRST APPEARANCE FORM

OBTS #	0142 6622			Agency ORI #	FL0420000																						
Court Case Number:	09-01379-CF-A-N		Felony	Misdemeanor	County or Municipal Ordinance Warrant / CAPIAS	Agency Case Number: 208-63991																					
Traffic	Juvenile					DOB Mo. 4/5/1974 Day	SEX F	RACE W	HGT 5'6"	WGT	HAIR Brown	EYES															
Defendant's Name: Last RAY	First VIOLET	Middle LOVE																									
Mailing Address: St. / P.O. Box 10694 SE 90th Court City BELLEVUE State FL Zip				Scars / Marks / Tatoos - Amputations (describe each)																							
St. Add: (if different): Street SAME AS ABOVE City N/A State Zip				Phone: Res. ()			Place of Birth TENNESSEE			Alias																	
Place of Employment: Street N/A				Phone: Bus. ()			Occupation HOUSEWIFE			Social Security No.																	
Driver Lic. No.: 2000873746250 State: FLORIDA				Veh. Towed by: N/A			Hold on Vehicle: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			Arrest Suffix: 01																	
Arrest Date: Mo. 04 Day Year 09				Arrest Location: Marion County Courthouse - Courtroom 3D			Agency:																				
U.S. Citizen: Y				Residence Type: 1. City 2. County N/A			3. Florida 4. Out-of-Florida																				
Activity: F. Forgery O. Counterfeit A. Fraud				X: Stolen Property T. Traffic P. Possess S. Sell			B: Buy R. Smuggle D. Deliver U. Use			M: Manufacture/ Produce/ Cultivate Z: Other			K: Dispense/ Distribute N: N/A			Type: A. Amphetamine B. Barbiturate C. Cocaine			P: Heroin H. Hallucinogen M. Marijuana O. Opium / Deriv			S: Synthetic U: Unknown P: Paraphernalia/ Equipment			U: Unknown Z: Other N. N/A		
CHARGES												Description: BEACH WARRANT FOR MURDER 1ST DEGREE AGGRAVATED CHILD ABUSE CHILD NEGLECT	Counts	Activity	Type	NCIC	CIS	Statute	Bond Amount	In Accordance to Bond Schedule							
												1	N	N	/ /	/ /	782.041A	NONE	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>								
												1	N	N	/ /	/ /	827.03.241	NONE	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>								
												1	N	✓	/ /	/ /	827.03.34	NONE	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>								
Indication of:												Weapon Seized / Type			Juvenile Disposition												
Alcohol Influence Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Unk <input type="checkbox"/>							1. Handled / Processed Within Dept. and Released			2. Turned Over to DRS / CYF																	
Drug Influence Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Unk <input type="checkbox"/>				Y <input type="checkbox"/> N <input checked="" type="checkbox"/>						3. Incarcerated (County Jail)																	
JAIL LOG: (To be completed by booking Officer)												Jail Inmate Number: 0															
Date Booked: 4-7-09	Time Booked: 1916	AM PM	Booking Officer: 5435	Fingerprinted By:			Photographed By:			Bin Number:																	
Advised of Rights: Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/>				Check for Warrant(s) NCIC <input type="checkbox"/> PCIC <input type="checkbox"/> Local <input type="checkbox"/>			Holds Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			Agency of Hold:																	
Attorney: (if known) Michael Johnson				Religion: J <input type="checkbox"/> P <input type="checkbox"/> C <input type="checkbox"/> Other <input checked="" type="checkbox"/>			Marital Status: S <input type="checkbox"/> M <input checked="" type="checkbox"/> D <input type="checkbox"/> Sep <input type="checkbox"/>			Telephone call logged: 4/10/09																	
Next of Kin / PARENTS OF JUVENILE: (for emergency) Sonja Hambler				Relation: Husband Mother			Address: 352 - 288-3941			Phone # ()																	
Bond Date: 4-7-09				Returnable Court Date: 4-7-09			AM	Release Date: /	Time: /	AM	PM	Releasing Officer:															
BOND, Charge A: CRIMINAL APR 10 2009				Charge B: /			Charge C: /			Charge D: /			Charge E: /														
NAME AND ADDRESS OF BONDSMAN: /												Bond Type: ROR <input type="checkbox"/> SURETY <input type="checkbox"/> Cash <input type="checkbox"/>															
												Bail Bond <input type="checkbox"/> Cert <input type="checkbox"/> Other <input type="checkbox"/>															

Approving Officer Signature: 

Complaint / Arrest

Court Case No.

Agency Case No.

Affidavit Continuation

Defendant Name: Last

First

Middle

RAY VIOLET LOVE

Date of Birth

4/5/74

PROBABLE CAUSE AFFIDAVIT:

(specify probable cause for each charge)

Before Me, the undersigned authority personally appeared
 information and belief, that on the _____ day of APRIL, 2009, in MARION County, Florida,
 the defendant, RD:

R. Stroop #2999

who being duly sworn, alleges, on

County, Florida,

WAS ARRESTED AS PER MARION COUNTY BENCH WARRANT

CASE 09-01379-CF-A-W

FOR MURDER IN THE FIRST DEGREE
 AGGRAVATED CHILD ABUSE
 CHILD NEGLECT

BENCH WARRANT SIGNED ON 4/6/09 by JUDGE DAVID EDDY
 FOR JUDGE HALE STANCIL

FILED
 CRIMINAL INTAKE
 2009 APR 8 A 8:44
 DAVID E. SPERMAN
 CLERK OF CIRCUIT COURT
 MARION COUNTY, FL

R. Stroop #2999

SWORN to and SUBSCRIBED before me
 this 7/14 day of APRIL,
 2009.

AFFIANT

M.J. - See #830

MCJO

Notary Public - Certified Officer
 (circle one)

ARRESTING AGENCY

SEAL

IN THE CIRCUIT COURT OF THE FIFTH JUDICIAL CIRCUIT,
IN AND FOR MARION COUNTY, FLORIDA

STATE OF FLORIDA

vs.

CASE NUMBER

09-01379-CF-A-W

VIOLET LOVE RAY

Defendant

BENCH WARRANT

TO ALL AND SINGULAR THE SHERIFFS OF THE STATE OF FLORIDA:

This is to command you to take the Defendant, VIOLET LOVE RAY , into custody if found in your county, and safely keep him/her so you have said Defendant before a judge of this Court to answer the State of Florida for GRAND JURY INDICTMENT for

001 MURDER IN THE FIRST DEGREE (CF)
002 AGGRAVATED CHILD ABUSE (FF)
003 CHILD NEGLECT (TF)

Bond Amount(s)
782.04.1A
827.03.2C.1
827.03.3.A

and have then and there this writ with due return of your action endorsed thereon.

THE STATE OF FLORIDA WILL EXTRADITE

Re YES _____ NO _____

WITNESS my hand and official seal of said Court at Ocala, Marion County, Florida, on April 6th, 2009.

DAVID R. ELSPERMANN
Clerk of the Circuit Court
Marion County, Florida

By *Ed Dean* D.C.

DONE AND ORDERED on April 6, 2009

HALE R. STANCIL

DEFENDANT INFORMATION

Name: RAY VIOLET LOVE	DOB: 04/05/1974	Driver's License Number-----State R000872746250 FL
Distinguishing Characteristics		Address
GENDER SEX	FEMALE	10694 SOUTHEAST 90TH COURT
RACE ORIGIN	WHITE	BELLEVUE, FL 34420
Initiating Agency	Agency Number	MSO Number

SHERIFF'S RETURN

Received this capias on 4/7/09, 2009, and returned it / executed on 4/7/09, 2009.

ED DEAN, Sheriff of Marion County, Florida

By *E. Dean #3999* D.S.